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CONFIRMATION NO. 5287

<b>SERIAL NUMBER</b> 10/563,748	<b>FILING or 371(c) DATE</b> 10/02/2006 <b>RULE</b>	<b>CLASS</b> 327	<b>GROUP ART UNIT</b> 2816	<b>ATTORNEY DOCKET NO.</b> 41514-5432	
<b>APPLICANTS</b> Toshiaki Inoue, Tokyo, JAPAN; <span style="border: 1px solid black; padding: 0 5px;">YES/DL</span>					
<b>** CONTINUING DATA *****</b> This application is a 371 of PCT/JP04/09718 07/08/2004					
<b>** FOREIGN APPLICATIONS *****</b> <span style="border: 1px solid black; padding: 0 5px;">YES/DL</span> JAPAN 2003-273258 07/11/2003					
<b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 03/29/2007					
Foreign Priority claimed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 35 USC 119(a-d) conditions met <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Verified and Acknowledged <u>/DINH THANH LE/</u> Examiner's Signature	<input type="checkbox"/> Met after Allowance Initials	<b>STATE OR COUNTRY</b> JAPAN	<b>SHEETS DRAWINGS</b> 16	<b>TOTAL CLAIMS</b> 30	<b>INDEPENDENT CLAIMS</b> 7
<b>ADDRESS</b> DRINKER BIDDLE & REATH (DC) 1500 K STREET, N.W. SUITE 1100 WASHINGTON, DC 20005-1209 UNITED STATES					
<b>TITLE</b> Data Transfer Method, DataTransfer Circuit, Output Circuit, Input Circuit, Semiconductor Device, and Electronic Apparatus					
<b>FILING FEE RECEIVED</b> 3490	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:			<div style="border: 1px solid black; padding: 2px;"> <input type="checkbox"/> All Fees         </div> <div style="border: 1px solid black; padding: 2px;"> <input type="checkbox"/> 1.16 Fees (Filing)         </div> <div style="border: 1px solid black; padding: 2px;"> <input type="checkbox"/> 1.17 Fees (Processing Ext. of time)         </div> <div style="border: 1px solid black; padding: 2px;"> <input type="checkbox"/> 1.18 Fees (Issue)         </div> <div style="border: 1px solid black; padding: 2px;"> <input type="checkbox"/> Other _____         </div> <div style="border: 1px solid black; padding: 2px;"> <input type="checkbox"/> Credit         </div>	